

# **Iowa Plumbing and Mechanical Systems Board**

# **Examination Candidate Application Instructions**

An application is not considered complete and will not be processed until all items have been submitted as required. Incomplete applications shall be considered invalid after 90 days and shall be destroyed.

Online applications must be submitted with credit card payment. Paper applications must be paid with check or money order payable to: Iowa Plumbing and Mechanical Systems Board. The memo area of the check should read "Plumbing and/or Mechanical Examination Fees". All fees are nonrefundable.

The following general information is required for all applications:

- Personal Information Name, address (personal/business), date of birth, social security number, telephone number.
- License Discipline and Level Identify the level of discipline examination you are applying for –
  Master or Journey. Then identify the specific discipline(s) of plumbing, HVAC/R, hydronics, sheet
  metal and/or mechanical. The \$35.00 examination fee applies to <u>each</u> discipline examination that
  is being requested.
- Journey Examination Candidates must provide:
  - (1) The United States Department of Labor Office of Apprenticeship identification number and sponsor identification number; or
  - (2) Provide the board evidence of having completed four years or more of apprentice like or on the job training prior to January 1, 2010. Evidence can include, a "Notarized Employment Verification Statement", copy of degree/certificate of completion from training/education institution, or copies of military DD214 or DD215 forms.
- Master Examination Candidates must provide information that they have:
  - (1) previously been licensed as a master in the applicable discipline; or
  - (2) previously been licensed as a journey in the applicable discipline and have at least two years of journey experience in the applicable discipline.

All completed applications must be submitted with the proper fees to:

Iowa Department of Public Health Iowa Plumbing and Mechanical Systems Board Lucas State Office Building 321 E 12th Street Des Moines, Iowa 50319

## Part I – Personal Information

Name - Full name of applicant.

<u>Mailing Address</u> – Provide personal and business information. Identify which address is to be used for mailing correspondences. The identified address may be listed on licensediniowa.gov with license registration information.

<u>Iowa Plumbing and Mechanical Systems Board License Number</u> - Provide current Board issued license number if applicable.

<u>Iowa Workforce Development Contractor Registration Number</u> – Provide current contractor number if applicable.

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### Part II - Examination Type

Identify the level of examination as either Master or Journey.

Identify the specific discipline(s) for examination as plumbing, HVAC/R, hydronics, sheet metal and/or mechanical.

Identify qualifying option for each discipline level and type.

Ex: Master Plumbing Option One or Journey HVAC Option Two

#### Part III - Examination Qualifications

#### **MASTER EXAMINATIONS**

# Master Examination Candidate by Previously held Master License - Section A - Option One

When applying for a master examination candidate under the criteria of previously holding a master level license, the following information will be needed for each discipline type:

License Discipline

License Grantor (Note: This is for the agency or jurisdiction that issued the license)

License Grantor Address

License Grantor Phone

Name of Contact person at issuing agency

License Number

License Issue Date

License Expiration Date

## Master Examination Candidate by Previously held Journey License - Section B - Option Two

When applying for a master examination candidate under the criteria of previously holding a journey level license, the following information will be needed for each discipline type:

License Grantor (Note: This is name of the agency/jurisdiction that issued the license)

**License Grantor Address** 

License Grantor Phone

Name of Contact person at issuing agency

License Number

License Issue Date

License Expiration Date

Verifiable Work Experience — This must include a minimum of two years verifiable experience at the journey level.

Current Employer Name, Address, Phone Dates of Employment Job Title Job Duties

Previous Employer Name, Address, Phone Dates of Employment Job Title Job Duties

#### **JOURNEY EXAMINATIONS**

# Journey Examination by United States Department of Labor Apprenticeship Section C – Option One

If applying for a journey examination candidate the following information will be needed from the United States Department of Labor Apprentice Indenture Agreement:

US Department of Labor Apprentice Identification Number

Apprenticeship Start Date

**Sponsor Name and Mailing Address** 

**US Department of Labor Sponsor Program Number** 

Number of advanced standing credit months (if applicable)

Expected date of apprenticeship completion

US Department of Labor certificate of completion number (if applicable)

# Journey Examination by Work Experience/Training prior to 01/01/2010 Section D – Option Two

If applying for a journey examination candidate the following information will be needed:

**Notarized Employment Verification Statement** 

-Or -

Degree/certificate of completion from training/ education institution

-Or

Copies of military DD214 or DD215 forms

## Part IV -Screening Questions -

All questions must be answered in order for the application to be processed. If you answer "Yes" to any of the questions, your application will be referred to the Iowa Plumbing and Mechanical Systems Board for review. You must answer "Yes" even when a conviction or judgment has been deferred or expunged from your record. Please provide all required documents with your application.

#### Part V – Applicant's Signature

Each applicant for licensure is required to submit their application with acknowledgement of the identified perjury statement. An applicant is responsible for the accuracy of the data regardless of whether an assistant completes and submits the applicant's licensure application.

<u>Social Security Number</u> — Privacy Act Notice: Disclosure of your Social Security Number is required by 42 U.S.C. § 666(a)(13) and Iowa Code § 252J.8(1). The number will be used in connection with the collection of child support obligations and as an internal means to accurately identify licensees, and may be shared with taxing authorities as allowed by law including Iowa Code § 421.18. This item will be found on the last page of the application.

Additional information can be obtained online at: <a href="http://www.idph.state.ia.us/eh/plumbing.asp">http://www.idph.state.ia.us/eh/plumbing.asp</a>
Or by calling: 1-866-280-1521